PTC/SB/06 (10-07)

Approved for use through 06/30/2010, OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION DESSESSED TO SEE 1 displays a yalld OMB control number.

| Substitute for Form PTO-876  |  |                                  |  |                   |                            |   |                          |              |                                   |                             | Appl           | dallon or Dookset                     | Number                      |
|--|--|----------------------------------|--|-------------------|----------------------------|---|--------------------------|--------------|-----------------------------------|-----------------------------|----------------|---------------------------------------|-----------------------------|
| APPLICATION AS FILED - PAF   |  |                                  |  |                   |                            |   | olumn 2)                 | . :.<br>•. , | SMALL                             | ЕИТІТҮ                      | OR             | OTHE<br>SMALL                         | R THAN<br>ENTITY            |
| FOR .  |  |                                  | NUMBER FILED   |                   | <u> </u>                   | NUM                                       | ER EXTRA                 | ٦.           | RATE (\$)                         | FEE (\$)                    | 7              |                                       | ]                           |
| BASIQ FEE<br>(\$7 OFR 1,16(a), (b); or (c))  |  | (0)                              |  | N/A               |                            |   | N/A                      | ٦'.          | - NA                              | 1 (EE (8)                   | -              | RATE (\$)                             | FEE (\$)                    |
| (87 C/FR   | .6EARCH FEE<br>(87 CFR 1.16(k), (I), or (m))<br>EXAMINATION FEE<br>(87 OFR 1.16(o), (p), or (q)) |                                  | N/A<br>N/A   |                   |                            | N/A<br>N/A                                |                          | ٦.           | N/A                               |                             | -              | N/A                                   |                             |
| (87 OFR  |  |                                  |  |                   |                            |   |                          | 7            | NVA                               |                             | 1              | N/A                                   | -                           |
| TOTAL CLAIMS<br>(37 CFR 1.16(II))  |  |                                  | minus 20 =   |                   | 20 =                       | •   |                          | ٦.           | × 25. =                           |                             | OR             | × 50 =                                | ļ                           |
| INDEPENDENT CLAIMS<br>(37 CFR 1.19(h))   |  |                                  |  | minus             |                            | •   |                          |              | × 105 =                           |                             |                |                                       | <del> </del>                |
| APPLICATION SIZE<br>FEE<br>(37 CFR 1.16(s))  |  |                                  | If the specification and drawings exceed sheets of paper, the application size fee is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16( |                   |                            |   | each                     |              |                                   |                             |                | × 210 =                               |                             |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(II))   |  |                                  |  |                   |                            |   |                          | -            | 185                               |                             |                | 370                                   |                             |
| * If the difference in column 1 is less than zero, enter *0" in column 2.  |  |                                  |  |                   |                            |   | (                        | TOTAL        |                                   | (                           | TOTAL          |                                       |                             |
| AMEND<br>8 23  | Total cere 1.16(f) Rependent cere 1.16(f) Print 1.16(f) Print 1.16(f)                            | (Colu<br>CL<br>REM<br>AF<br>AMEN |  | Minus Minus 6(s)) | HIG<br>NUI<br>PREV<br>PAIC | HEST<br>MBER<br>IOUSLY<br>DEOR            | (Column 3) PRESENT EXTRA |              | SMALL  RATE (\$)  × 25 =  × 105 = | ADDI-<br>TIONAL<br>FEE (\$) | OR<br>OR<br>OR | * * * * * * * * * * * * * * * * * * * | ADDI-<br>TIONAL<br>FEE (\$) |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(J))  |  |                                  |  |                   |                            |   |                          |              | 185                               |                             | OR             | 340<br>#0                             |                             |
|  |  |                                  |  |                   |                            | •   |                          |              | TOTAL<br>ADD'L FEE                |                             | OR             | TOTAL<br>ADD'L FEE                    |                             |
| ENT B  | Total  | REMA<br>AFT                      | nn 1)<br>JMS<br>JNING<br>JER<br>DMENT:   |                   | HIGI<br>NUN<br>PREVI       | lumn 2)<br>HEST<br>MBER<br>OUSLY<br>) FOR | (Column 3) PRESENT EXTRA |              | RATE (\$)                         | ADDI-<br>TIONAL<br>FEE (\$) |                | RATE (\$)                             | ADDI-<br>TIONAL<br>FEE (\$) |
|  | CFR (.160))  | · :                              |  | Minus<br>Minus    | 414                        | · ·                                       | =                        |              | × 15 =.                           |                             | <b>O</b> R     | × 50 =                                | 1                           |
| m L  | Independent Minus Minus Application Size Fee (37 CFR 1.16(s))                                    |                                  |  |                   |                            | · .                                       | ± .                      |              | × 105 =                           |                             | .OR            | x 210 =                               |                             |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1))                                  |                                  |  |                   |                            |   |                          |              | 185                               |                             |                | 3 70<br>NA                            |                             |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter the "In this SPACE is less than 20. |  |                                  |  |                   |                            |   |                          |              | TOTAL<br>ADD'L FEE                |                             | OR OR          | TOTAL<br>ADD'L FEE                    |                             |

"If the "Highest Number Previously Paid For" (N-THIS SPACE is less than 3, enter "3").

The "Highest Number Previously Paid For" (N-THIS SPACE is less than 3, enter "3").

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.